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www.perkinscoie.comDATE: January 6, 2004 COVER SHEET & 7 PAGE(S)CLIENT NUMBER: 59462-8014.US01RETURN TO: (NAME) Sharon T. Yarborough (EXT.) 1779 (ROOM NO.) 800ORIGINAL DOCUMENT(S) WILL BE: ☐ SENT TO YOU ☐ HELD IN OUR FILES

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| Examiner Wayne Langel | US Patent & Trademark Office,<br>Art Unit 1754 | (571) 272-1353 | (703) 872-9306 |

RE: U.S. Serial No.: 09/788,222 AFTER FINAL AMENDMENT

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www.perkinscoie.comDATE: September 17, 2003 COVER SHEET & 5 PAGE(S)CLIENT NUMBER: 59462-8014.US01RETURN TO: (NAME) Sharon Yarborough (EXT.)1779 (ROOM No.) 700ORIGINAL DOCUMENT(S) WILL BE: ☐ SENT TO YOU ☐ HELD IN OUR FILES

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| <u>David Bogart Dort, Reg. No 50,213</u> | <u>(202) 434-1608</u> | <u>(202) 318-4614</u><br><u>(NEW)</u> |

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| <u>Examiner Wayne Langel</u> | <u>USPTO, Art Unit 1754</u> |            | <u>703-872-9311</u> |

RE: 09/788,222; AFTER FINAL AMDT.



Attorney Docket No. 59462-8014.US01

IN THE UNITED STATES DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE

In re Patent Application of KIM

Application No.: 09/788,722

Group Art Unit: 1754

Filed: February 16, 2001

Examiner: Langel, W.

For: (as amended) METHOD OF GASIFYING CARBONACEOUS MATERIAL

**CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8a)**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is by transmitted by facsimile to Examiner Wayne Langel of the United States Patent and Trademark Office at Art Unit 1754 at Fax No. 703-872-9311 on this 17th day of September, 2003.  
Date: September 17, 2003

David Bogart Dort

Mail Stop: After-Final Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1405

**TRANSMITTAL**

- ☒ Transmitted herewith are the following documents for the above-referenced application:
- ☒ Amendment and Remarks

**STATUS**

- ☒ Applicant is
- ☐ other than a small entity.

**EXTENSION OF TIME**

- ☐ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

| Extension<br>(months)                 | Fee for other than<br>small entity | Fee for<br>small entity |
|---------------------------------------|------------------------------------|-------------------------|
| <input type="checkbox"/> one month    | \$ 110.00                          | \$ 55.00                |
| <input type="checkbox"/> two months   | \$ 410.00                          | \$205.00                |
| <input type="checkbox"/> three months | \$ 930.00                          | \$465.00                |

- ☒ Applicant believes that no extension of time is required. However, this conditional petition is hereby made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

Attorney Docket No. 59462-8014.US01

## FEE FOR CLAIMS

☐ If an additional extension of time is required please consider this a petition therefor.

☐ An extension for \_\_\_\_\_ months has already been secured and the fee paid therefor of \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_

☒ The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

| (Col. 1)   |   |           |    | (Col. 2)                        |   | (Col. 3)         |    | SMALL ENTITY |  | OR         |                  | OTHER THAN A SMALL ENTITY |  |            |         |
|--|---|-----------|----|---------------------------------|---|------------------|----|--------------|--|------------|------------------|---------------------------|--|------------|---------|
| Claims Remaining After Amendment                                   |   |           |    | Highest No. Previously Paid For |   | Present Extra    |    | Rate         |  | Addit. Fee |                  | Rate                      |  | Addit. Fee |         |
| Total  | 1 | Minus "0" | 20 | =                               | 0 | x9=              | \$ |              |  | x18=       | \$               | 0.00                      |  |            | \$ 0.00 |
| Indep.   | 1 | Minus "0" | 3  | =                               | 0 | x42=             | \$ |              |  | x84=       | \$               | 0.00                      |  |            | \$ 0.00 |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |   |           |    |                                 |   | +140=            | \$ |              |  | x280=      | \$               | 0.00                      |  |            | \$ 0.00 |
|  |   |           |    |                                 |   | TOTAL ADDIT. FEE | \$ |              |  | OR         | TOTAL ADDIT. FEE | \$                        |  |            | \$ 0.00 |
|  |   |           |    |                                 |   |                  |    | 0.00         |  |            |                  | 0.00                      |  |            |         |

☒ No additional fee for claims required.

☐ Total additional fee for claims required \$ \_\_\_\_\_.

## FEE PAYMENT

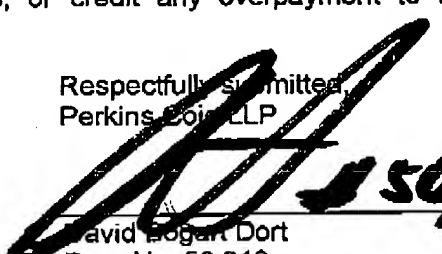
☐ Attached is a check in the sum of \$ \_\_\_\_\_.

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## FEE DEFICIENCY

☒ In the event that a) no check to cover the filing fee is enclosed, b) any above-referenced check is inadvertently omitted or lost, or c) any enclosed check is in an amount less than or greater than the required fee, the Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 50-2283.

Respectfully submitted,  
Perkins Coie LLP

  
David Logan Dort  
Reg. No. 50,213

Date: September 27, 2003  
Washington, DC  
Customer No. 37815  
PERKINS COIE LLP